

| | | | | | | | |
|---|--|--|--|---|--|---|--|
| SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, & 30 | | | | 1. REQUISITION NUMBER REQ-4200-05-0020 | | PAGE OF 1 3 | |
| 2. CONTRACT NO. GS-07F-5653R | | 3. AWARD/ EFFECTIVE DATE 09/29/2005 | | 4. ORDER NUMBER CPSC-F-05-0039 | | 5. SOLICITATION NUMBER | |
| 7. FOR SOLICITATION INFORMATION CALL: | | a. NAME William Graves | | b. TELEPHONE NUMBER 301-504-7045 (No collect calls) | | 8. OFFER DUE DATE/LOCAL TIME | |
| 9. ISSUED BY | | CODE ADPS | | 10. THIS ACQUISITION IS <input checked="" type="checkbox"/> UNRESTRICTED OR <input type="checkbox"/> SET ASIDE: % FOR: <input type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> EMERGING SMALL BUSINESS <input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS <input type="checkbox"/> 8(A) NAICS: 334519 SIZE STANDARD: 500 | | | |
| 11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE | | 12. DISCOUNT TERMS Net 30 | | 13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700) <input type="checkbox"/> | | 13b. RATING | |
| 15. DELIVER TO | | CODE LS | | 16. ADMINISTERED BY | | | |
| CONSUMER PRODUCT SAFETY COMMISSION DIV OF PROCUREMENT SERVICES 4330 EAST WEST HWY ROOM 517 BETHESDA MD 20814 | | | | CONSUMER PRODUCT SAFETY COMMISSION DIV OF PROCUREMENT SERVICES 4330 EAST WEST HWY ROOM 517 BETHESDA MD 20814 | | | |
| 17a. CONTRACTOR/OFFEROR | | CODE 872876008 | | FACILITY CODE | | 18a. PAYMENT WILL BE MADE BY | |
| ALICAT SCIENTIFIC INC ATTN CHERYL HARMS 2045 N FORBES BLVD SUITE 103 TUCSON AZ 85745-5144 | | | | | | CONSUMER PRODUCT SAFETY COMMISSION DIVISION OF FINANCIAL SERVICES 4330 EAST WEST HWY, ROOM 522 BETHESDA MD 20814 | |
| TELEPHONE NO. (520) 290-6060 | | | | 18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM | | | |
| 19. ITEM NO. | | 20. SCHEDULE OF SUPPLIES/SERVICES | | 21. QUANTITY | | 22. UNIT | |
| | | Tax ID Number: 860715584 DUNS Number: 872876008 THE CONTRACTOR SHALL PROVIDE THE FOLLOWING: | | | | 23. UNIT PRICE | |
| 0001 | | MC-500SCCM-D/5M, 5IN, GAS: BUTANE. DESCRIPTION: MASS CONTROLLER, 0 - 500 SCCM, DIGITAL DISPLAY, 0-5 VOLTS INPUT/OUTPUT, GAS SELECTABLE, SET TO BUTANE. | | 1 | | EA 864.00 | |
| 0002 | | MC-5SLPM-D/5M, 5IN, GAS: AIR, DESCRIPTION: MASS Continued ... (Use Reverse and/or Attach Additional Sheets as Necessary) | | 1 | | EA 884.00 | |
| | | | | | | 24. AMOUNT | |
| 25. ACCOUNTING AND APPROPRIATION DATA 05 PS EXOB 4200 24013 311B | | | | 26. TOTAL AWARD AMOUNT (For Govt. Use Only) \$10,532.00 | | | |
| 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4. FAR 52.212-3 AND 52.212-5 ARE ATTACHED. ADDENDA <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED | | | | 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4. FAR 52.212-5 IS ATTACHED. ADDENDA <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED | | | |
| 28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED HEREIN. | | | | 29. AWARD OF CONTRACT: REF. AQN0002328 OFFER DATED 08/17/2005. YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS: Mass Controllers | | | |
| 30a. SIGNATURE OF OFFEROR/CONTRACTOR | | | | 31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) | | | |
| 30b. NAME AND TITLE OF SIGNER (Type or print) | | 30c. DATE SIGNED | | 31b. NAME OF CONTRACTING OFFICER (Type or print) Joyce M. Lawn | | 31c. DATE SIGNED 9-29-05 | |

| 19. ITEM NO. | 20. SCHEDULE OF SUPPLIES/SERVICES | 21. QUANTITY | 22. UNIT | 23. UNIT PRICE | 24. AMOUNT |
|-----------------|---|-----------------|-------------|-------------------|---------------|
| | CONTROLLER, 0 - 5 SLPM RANGE, DIGITAL DISPLAY, 0 - 5 VOLTS INPUT/OUTPUT, GAS SELECTABLE. | | | | |
| 0003 | MC-2SLPM-D/5M, 5IN, GAS: AIR DESCRIPTION: MASS CONTROLLER, 0 - 2 SLPM, DIGITAL DISPLAY, 0 - 5 VOLTS INPUT/OUTPUT, 14 GAS SELECTABLE, SET TO AIR. | 1 | EA | 864.00 | 864.00 |
| 0004 | MC-50SCCM-D/5M, 5IN, GAS: AIR DESCRIPTION: MASS CONTROLLER, 0 - 50 SCCM, DIGITAL DISPLAY, 0-5 VOLTS INPUT/OUTPUT, GAS SELECTABLE. | 1 | EA | 956.00 | 956.00 |
| 0005 | MC-500SCCM-D/5M, 5IN, GAS: AIR DESCRIPTION: MASS CONTROLLER, 0-500 SCCM RANGE, DIGITAL DISPLAY, 0-5 VOLTS INPUT/OUTPUT, GAS SELECTABLE. | 1 | EA | 864.00 | 864.00 |
| 0006 | MC-20SCCM-D/5M, 5IN, GAS: AIR DESCRIPTION: MASS CONTROLLER, 0 - 20 SCCM RANGE, DIGITAL DISPLAY, 0 - 5 VOLTS INPUT/OUTPUT, GAS SELETABLE. | 1 | EA | 956.00 | 956.00 |
| 0007 | MC-ISLPM-D/5M, 5IN, GAS: AIR DESCRIPTION: MASS CONTROLLER, 0-1 SLPM, DIGITAL DISPLAY, 0 - 5 VOLTS INPUT/OUTPUT, GAS SELECTABLE, SET TO AIR. | 1 | EA | 864.00 | 864.00 |
| 0008 | MC-10SLPM-D/5M, 5IN, GAS: AIR DESCRIPTION: MASS CONTROLLER, 0 -10 SLPM RANGE, DIGITAL DISPLAY, 0 - 5 VOLTS INPUT/OUTPUT, GAS SELECTABLE SET TO AIR. | 1 | EA | 908.00 | 908.00 |
| | Continued ... | | | | |

32a. QUANTITY IN COLUMN 21 HAS BEEN

☐ RECEIVED☐ INSPECTED

ACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS

☐ NOTED:32b. SIGNATURE OF AUTHORIZED GOVERNMENT
REPRESENTATIVE

32c. DATE

32d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32f. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE

33. SHIP NUMBER

34. VOUCHER NUMBER

35. AMOUNT VERIFIED
CORRECT FOR

36. PAYMENT

37. CHECK NUMBER

☐ PARTIAL ☐ FINAL☐ COMPLETE ☐ PARTIAL ☐ FINAL

38. S/R ACCOUNT NUMBER

39. S/R VOUCHER NUMBER

40. PAID BY

41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT

42a. RECEIVED BY (Print)

41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER

41c. DATE

42b. RECEIVED AT (Location)

42c. DATE REC'D (YY/MM/DD)

42d. TOTAL CONTAINERS

CONTINUATION SHEET

 REFERENCE NO. OF DOCUMENT BEING CONTINUED
 GS-07F-5653R/CPSC-F-05-0039

PAGE 3 OF 3

NAME OF OFFEROR OR CONTRACTOR

ALICAT SCIENTIFIC INC

| ITEM NO. (A) | SUPPLIES/SERVICES (B) | QUANTITY (C) | UNIT (D) | UNIT PRICE (E) | AMOUNT (F) |
|-----------------|---|-----------------|-------------|-------------------|---------------|
| 0009 | MC-100SCCM-D/5M, 5IN, RANGE: 60SCCM, GAS: BUTANE. DESCRIPTION: MASS CONTROLLER, 0 -100 SCCM, RANGED TO 60SCCM, DIGITAL DISPLAY, 0 - 5 VOLTS INPUT/OUTPUT, GAS SELECTABLE, SET TO BUTANE. | 1 | EA | 864.00 | 864.00 |
| 0010 | PVPS/ACCESSORY DESCRIPTION: 12 VOLT POWER SUPPLY. | 10 | EA | 32.00 | 320.00 |
| 0011 | MC-50SLPM-D/5M, 5IN, GAS: AIR DESCRIPTION: MASS CONTROLLER, 0 - 50 SLPM RANGE, DIGITAL DISPLAY, 0 - 5 VOLTS INPUT/OUTPUT, GAS SELECTABLE SET TO AIR. | 1 | EA | 1,052.00 | 1,052.00 |
| 0012 | MC-10SCCM-D/5M, 5IN, GAS AIR DESCRIPTION: MASS CONTROLLER, 0 - 10 SCCM RANGE, DIGITAL DISPLAY, 0 - 5, VOLTS INPUT/OUTPUT, GAS SELCTABLE SET TO AIR. | 1 | EA | 1,084.00 | 1,084.00 |
| 0013 | PVPS 24/ACCESSORY DESCRIPTION: 24 VOLT POWER SUPPLY NEEDED FOR THE MC-50SLPM-D CONTROLLER ONLY. THE CPSC PROJECT OFFICER IS DAVID TUCHOLSKI AT (301) 424-6421 EXTENSION 135 REFERENCE YOUR GSA FSS NUMBER GS-07F-5653R DELIVERY: F.O.B. DESTINATION 3 WEEKS AFTER RECEIPT OF DELIVERY ORDER Total amount of award: \$10,532.00. The obligation for this award is shown in box 26. | 1 | EA | 52.00 | 52.00 |

52.0000-4004A CONTRACTOR'S NOTE

Deliveries and/or shipments shall not be left at the Loading Dock. All deliveries shall be considered "inside deliveries" to the appropriate room at the Consumer Product Safety Commission (CPSC) and in accordance with the instructions below. When scheduling deliveries the purchase order number shall always be referenced and all packages shall clearly display the Purchase Order Number on the outside of the cartons and/or packages, to include the packing slip.

ATTENTION GOVERNMENT VENDOR

A. DELIVERY INSTRUCTIONS FOR LARGE OR HEAVY ITEMS:

If the shipment or item being delivered requires use of a loading dock, advance notification is required. The contractor shall contact Mr. Arliss Butler, Shipping and Receiving Coordinator at (240) 882-6386 or Mr. Ray Garcia, Property Management Officer at (301) 504-7113, forty-eight (48) hours in advance of the date the items are to arrive to schedule use of the loading dock.

LOADING DOCK HOURS OF OPERATION:

9:00a.m. to 11:00a.m. or 1:30p.m. to 4:00p.m.
Monday through Friday (except holidays)

Please notify contact person if there is a change in the delivery date. For changes, delays, or assistance please contact CPSC as follows:

Administrative Services (301) 504-7085
Procurement Services (301) 504-7045

Upon arrival, the driver should use the intercom box at the loading dock to obtain assistance in using freight elevators and to gain access to CPSC security areas.

B. DELIVERY INSTRUCTION FOR SMALL ITEMS

When delivering or shipping small items, the contractor and/or carrier service shall report to the 4th floor lobby, North Tower, 4330 East West Highway, to sign in with the CPSC guard. Upon completion of signing in, the contractor shall deliver all shipments to the Mail Room, Room 516. After delivery, delivery personnel shall promptly depart the building.

MAIL ROOM HOURS OF OPERATION:

Monday through Friday (except holidays) – 7:30a.m. to 5:00p.m.

C. BILLING INSTRUCTIONS

Pursuant to the Prompt Payment Act (P.L. 97-177) and the Prompt Payment Act Amendments of 1988 (P.L. 100-496) all Federal agencies are required to pay their bills on time, pay interest penalties when payments are made late, and to take discounts only when payments are made within the discount period. To assure compliance with the Act, vouchers and/or invoices shall be submitted on any acceptable invoice form which meets the criteria listed below. Examples of government vouchers that may be used are the Public Vouchers for Purchase and Services Other Than Personal, SF 1034, and Continuation Sheet, SF 1035. At a minimum, each invoice shall include:

1. The name and address of the business concern (and separate remittance address, if applicable).
2. Taxpayer Identification Number (TIN).
3. Invoice date (use of invoice number in addition to invoice date is prudent but not required).
4. The contract or purchase order number (see block 2 of OF347 and block 4 of SF1449 on page 1 of this order), or other authorization for delivery of goods of services.
5. Description, price and quantity of goods or services actually delivered or renders.
6. Shipping cost terms (if applicable).
7. Payments terms.

All vendors please include the following information when invoicing for payment: ACH Vendor Information which includes the :
Financial Institution, routing transit number, and depositor account number. In addition please specify whether account is a checking account or savings account.

8. Other substantiating documentation or information as specified in the contract or purchase order.
9. Name (where practicable), title, phone number and mailing address of responsible official to be notified in the event of a deficient invoice.

ORIGINAL VOUCHERS/INVOICES SHALL BE SENT TO:

Accounting Officer
Div. of Financial Services, Room 522
U.S. Consumer Product Safety Commission
Washington, D.C. 20207-9910

Invoices not submitted in accordance with the above stated minimum requirements will not be processed for payment. Deficient invoices will be returned to the vendor within seven days or sooner. Standard forms 1034 and 1035 will be furnished by CPSC upon request of the contractor.

D. PAYMENT

Payment will be made as close as possible to, but not later than, the 30th day after receipt of a proper invoice as defined in "Billing Instructions," except as follows:

When a time discount is taken, payment will be made as close as possible to, but not later than, the discount date. Discounts will be taken whenever economically justified. Otherwise, late payments will include interest penalty payments. Inquiries regarding payment should be directed to the Accounting Officer on (301) 504-7172 at the following address:

Accounting Officer
Div. of Financial Services, Room 522
U.S. Consumer Product Safety Commission
Washington, D.C. 20207-9910

Complaints related to the late payment of an invoice should be directed to Deborah Peebles Hodge, Director, Division of Financial Services at the same address (above).

E. INSPECTION & ACCEPTANCE PERIOD

The Commission at the destination point within three (3) working days after the date of receipt shall inspect all materials/services. The CPSC contact person will transmit disapproval, if appropriate.

F. ALL OTHER INFORMATION RELATING TO THE PURCHASE ORDER

CONTACT: William Graves @ (301) 504-7045.

PROCESSING INSTRUCTIONS FOR REQUESTING OFFICES

The Purchase Order/Receiving Report (Optional Form 347 or Standard Form 1449) must be completed at the time the ordered goods or services are received. Upon receipt of the goods or services ordered, each item should be inspected, accepted (partial or final) or rejected. The Purchase Order/Receiving Report must be appropriately completed, signed and dated by the authorized receiving official. In addition, the acceptance block shall be completed (Blocks 32 a, b & c on the SF 1449 and column G and page 2 of the OF 347). The receiving report shall be retained by the requesting office for confirmation when certifying invoices.

PROPERTY/EQUIPMENT PURCHASES

In the case of Purchase Orders/Receiving Reports involving the purchase and receipt of property/equipment, a copy of the Purchase Order/Receiving Report must also be immediately forwarded directly to the Property Management Officer (Rey Garcia) in the Administration Services Branch (Room 520). The transmittal of Purchase Orders/Receiving Reports to the property management officer is critical to the integrity and operation of CPSC's Property Management System. Receiving officials should also forward copies to their local property officer/property custodian consistent with local office procedures.